



## PROPERTY OWNER AUTHORIZATION FOR SPECIAL EVENT USE

5025 South State Street #113, Murray, Utah 84107

Phone: (801) 264-2676 Fax: (801) 264-2618

To be completed and signed by *property owner*

PROPERTY OWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY OWNER HOME ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_ MURRAY, UT \_\_\_\_\_

NAME OF EVENT ORGANIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_

REPRESENTATIVE/MANAGER \_\_\_\_\_ TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WORK PHONE: (\_\_\_\_) \_\_\_\_\_ HOME / CELL PHONE: (\_\_\_\_) \_\_\_\_\_

EVENT  
DESCRIPTION: \_\_\_\_\_

DATES APPROVED: START: \_\_\_\_\_ END: \_\_\_\_\_

TIME FRAME: START: \_\_\_\_\_ END: \_\_\_\_\_

NO. OF ATTENDEES AUTHORIZED: \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

AS THE ABOVE LISTED PROPERTY OWNER, I HEREBY GIVE MY PERMISSION FOR THE EVENT LISTED ABOVE TO BE HELD AT THE ABOVE ADDRESS, DURING THE LISTED DATES AND TIMES.

I ACKNOWLEDGE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT AND AGREE TO ADHERE TO ALL RULES, REGULATIONS, AND POLICIES ESTABLISHED BY MURRAY CITY CORPORATION. THE UNDERSIGNED AGREES TO WAIVE AND RELEASE ALL RIGHTS AND CLAIMS THAT MIGHT BE HAD AGAINST MURRAY CITY CORPORATION FOR ANY AND ALL INJURIES OR LOSSES SUFFERED BECAUSE OF PARTICIPATION IN OR USE OF MURRAY CITY FACILITIES OR SERVICES.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_